PART B - FEE(S) TRANSMITTAL send his form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 0 6 2005 Alexandria, Virginia 22313-1450 (703) 746-4000 or <u>Fax</u> INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate ATRACTION FEE (if required). Blocks 1 through 5 should be completed where appropriate ATRACTION FEE (if required). Blocks 1 through 5 should be completed where appropriate ATRACTION FEE (if required). Blocks 1 through 5 should be completed where appropriate ATRACTION FEE (if required). Blocks 1 through 5 should be completed where appropriate ATRACTION FEE (if required). Blocks 1 through 5 should be completed where appropriate ATRACTION FEE (if required). Blocks 1 through 5 should be completed where appropriate ATRACTION FEE (if required). Blocks 1 through 5 should be completed where appropriate ATRACTION FEE (if required). Blocks 1 through 5 should be completed where appropriate ATRACTION FEE (if required). Blocks 1 through 5 should be completed where appropriate ATRACTION FEE (if required). Blocks 1 through 5 should be completed where appropriate ATRACTION FEE (if required). Blocks 1 through 5 should be completed where appropriate ATRACTION FEE (if required). Blocks 1 through 5 should be completed where appropriate ATRACTION FEE (if required). Blocks 1 through 5 should be completed where appropriate ATRACTION FEE (if required). Blocks 1 through 5 should be completed appropriate ATRACTIC FEE (if required). Blocks 1 through 5 should be completed where appropriate ATRACTIC FEE (if required). Blocks 1 through 5 should be completed where appropriate ATRACTIC FEE (if required). Blocks 1 through 5 should be completed where ATRACTIC FEE (if required). Blocks 1 through 5 should be completed where ATRACTIC FEE (if required). Blocks 1 through 5 should be completed where ATRACTIC FEE (if required). Blocks 1 through 5 should be completed where ATRACTIC FEE (if required). Blocks 1 through 5 should be completed where ATRACTIC FEE (if required). Blocks 1 through 5 should be completed where ATRACTIC FEE (if required). Blocks 1 through 5 should be completed where ATRAC maintenance fee notifications. CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. 24131 7590 10/01/2004 LERNER AND GREENBERG, PA Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below. P O BOX 2480 HOLLYWOOD, FL 33022-2480 RALPHE. LOCHER 01/10/2005 HGUTEMA2 00000005 09885555 (Depositor's name 41.947 01 FC:1501 02 FC:1504 1400.00 OP (Signature 300.00 OP anuary 2005 (Date APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. 09/885.555 06/20/2001 Manfred Janson GR 00 P 12398 5639 TITLE OF INVENTION: DEVICE FOR CONNECTING A DATA PROCESSING DEVICE TO A TELECOMMUNICATIONS SYSTEM **PUBLICATION FEE** APPLN. TYPE SMALL ENTITY ISSUE FEE TOTAL FEE(S) DUE DATE DUE \$1670-1,700 <u> 51370- 1,400</u> 01/03/2005 NO nonprovisional **EXAMINER** ART UNIT **CLASS-SUBCLASS** 2642 379-219000 HONG, HARRY S 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 2. For printing on the patent front page, list Laurence A. Greenberg (1) the names of up to 3 registered patent attorneys Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. or agents OR, alternatively, Werner H. Stemer (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Gregory L. Mayback Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

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a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.	☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).
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